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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. SCHIFF HARDIN LLP Patent Department 6600 Sears Tower 233 South Wacker Drive Noll steven H. (Depositor's name Chicago, IL 60606 12/13/2005 FMETEKI2 00000067 10820914 (Signature 8, 2005 (Date) Dec. 1400.00 OP 01 FC:1501 02 FC:1504 APPLICATION NO. FILING DATE OF FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/820,914 04/08/2004 Eberhard Lenz P04,0141 8758 TITLE OF INVENTION: HIGH-CAPACITY X-RAY TUBE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE APPLN. TYPE SMALL ENTITY **ISSUE FEE** 12/12/2005 NO \$1400 \$300 \$1700 nonprovisional ART UNIT CLASS-SUBCLASS EXAMINER 2882 378-125000 KEANEY, ELIZABETH MARIE 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Schiff Hardin LLP 1) the names of up to 3 registered patent attorneys \square Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Munich, **GERMANY** Siemens Aktiengesellschaft TPlease check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number ______ (enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) ■ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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